PTO/SB/17 (09-11)
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	[Application Number		10/595,831-Conf. #7426				
FEE TF	. [Filing Date		March 2, 2007				
		First Named Inv	entor	Jochen Peters				
<u> </u>				Examiner Name		M. N. Opsasnicl	<	
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 2		2626	2626	
TOTAL AMOUNT OF PAY	MENT	(\$) 2,040.0	00	Attorney Docket No. N0484.700			300	
METHOD OF PAYM	ENT (check a	II that apply)						
Check X Cred	it Card	Money Order	Non	e Other (please ident	ify):	,	
Deposit Account	Deposit Account No	ımber: 23/	/2825	Deposit a	Account Nan	ne: Wolf, Greenfi	eld & Sacks, P.C.	
For the above-io	lentified depos	it account, the D	irector is	hereby authorize	d to: (che	eck all that apply)		
Charge fee	e(s) indicated l	below		Charge	e fee(s) in	idicated below, exc	ept for the filing fee	
	er 37 CFR 1.1	e(s) or underpay 5 and 1.17		LX Groun		payments	le credit eard	
Information and authorization	on on PTO-2038.	come public. Credi	t card iiiio	mation should not	be include	d on this form. Provid	e credit card	
FEE CALCULATION		ARAINIATION	F0					
1. BASIC FILING, SEAF		AMINATION FEI ING FEES		RCH FEES		NATION FEES		
	FIL	Small Entity	SEF	Small Entity	EXAMI	Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)		Fee (\$)		Fees Paid (\$)	
Utility	380	190	620	310	250	125		
Design	250	125	120	60	160	80		
Plant	250	125	.380	190	200	100		
Reissue Provisional	380	190	620	310	750	375		
	250	125	0	0	. 0	0 _		
2. EXCESS CLAIM FEE	S					Fee (\$	Small Entity) Fee (\$)	
Fee Description Each claim over 20 (inc	ludino Reissu	ec)				60	30	
Each independent claim over 3 (including Reissues)				•		250	125	
Multiple dependent clair		, , , , , , , , , , , , , , , , , , , ,				450	225	
Total Claims	Extra Claims	Fee (\$)_	Fee Paid (\$)		Multiple Dependent Claims			
HP = highest number of total	claims paid for i	x =	***************************************		<u>F</u>	ee (\$) <u>Fe</u>	e Paid (\$)	
	Extra Claims	Fee (\$)	Fe	e Paid (\$)				
7 -7 or HP =		x =						
HP = highest number of inde	•	aid for, if greater tha	n-3					
3. APPLICATION SIZE I If the specification and listings under 37 CF sheets or fraction th	drawings exc R 1.52(e)), th	e application siz	ze fee due	is \$310 (\$155 fe	onically f or small e	iled sequence or co entity) for each add	omputer litional 50	
Total Sheets	Extra Sheets			ditional 50 or frac	tion there	of Fee (\$)	Fee Paid (\$)	
- 100 =		/50 =		(round up to a who	le number)			
4. OTHER FEE(S) Non-English Specific	*			unt)			Fees Paid (\$)	
Other (e.g., late filing		1501 Utility iss 1504 Publicatio		r early, volunta	ry, or no	rmal	1,740.00 300.00	
SUBMITTED BY		-2-,						
Signature			I.	Registration No. (Attorney/Agent)	65,065	Telephone	617.646.8000	
Name (Print/Type) Ling C	heung Hugh	es, Ph.D.				Date C	1/17	
	5 5.					3/1	/16	
I hereby certify that this pa	por /along with			Filing Under 37 C			0.6	

SUBMITTED BY						
Signature		3	Registration No. (Attorney/Agent)	65,065	Telephone	617.646.8000
Name (Print/Type)	Ling Cheung Hughes, Ph	ı.D.			Date 5	111/17
					,	
I hereby certify	Ce that this paper (along with any pap rdance with 37 CFR § 1.6(a)(4).	rtificate of Electr er referred to as b	conic Filing Under 37 being attached or end	7 CFR 1.8 losed) is being	transmitted via t	the Office electronic filing
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